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909 7590 04/16/2007

PILLSBURY WINTHROP SHAW PITTMAN, LLP
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07/16/2007 SFELEKE2 00000114 033975 10518367

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(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/518,367	11/18/2005	Tsuyoshi Shiga	007324-0314107	8190

TITLE OF INVENTION: ROTOR FOR PERMANENT MAGNET MOTOR OF OUTER ROTOR TYPE

APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400	\$300	\$0	\$1700	07/16/2007
EXAMINER	ART UNIT	CLASS-SUBCLASS				
NGUYEN, TRAN N	2834	310-043000				

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.

"Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list

(1) the names of up to 3 registered patent attorneys or agents OR, alternatively,
(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1 PILLSBURY WINTHROP
2 SHAW PITTMAN, LLP
3 _____

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

1. KABUSHIKI KAISHA TOSHIBA
2. Toshiba HA Products Co., Ltd.
3. Toshiba Consumer Marketing Corporation

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

TOKYO, Japan
OSAKA, Japan
TOKYO, Japan

Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Government

4a. The following fee(s) are submitted:

Issue Fee
 Publication Fee (No small entity discount permitted)
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 The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 033975 (enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above)

a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.

b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Authorized Signature E. Rico Hernandez

Date July 13, 2007

Typed or printed name E. Rico Hernandez

Registration No. 47641

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